



TO/SB/30 (10-01)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL</b>  Address to: Commissioner for Patents Box RCE Washington, DC 20231	<b>Application Number</b>	10/070,292
	<b>Filing Date</b>	March 5, 2002
	<b>First Named Inventor</b>	Tanaka et al.
	<b>Group Art Unit</b>	1762
	<b>Examiner Name</b>	Michael Barr
	<b>Attorney Docket No.</b>	204552022500

**This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.**

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. **Submission required under 37 CFR 1.114**

a. ☒ Previously submitted

i. ☒ Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on October 17, 2003  
(Any unentered amendment(s) referred to above will be entered).

ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_

iii. ☐ Other \_\_\_\_\_

b. ☐ Enclosed

i. ☐ Amendment/Reply 11/18/2003 WGBREH1 00000084 031952 10070292

ii. ☐ Affidavit(s)/Declaration(s) 01 FC:1801 770.00 DA

iii. ☐ Information Disclosure Statement (IDS)

iv. ☐ Other \_\_\_\_\_

2. **Miscellaneous**

a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of \_\_\_\_\_ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)

b. ☐ Other \_\_\_\_\_

3. **Fees** The RCE fee under 37 CFR 1.17 (e) is required by 37 CFR 1.114 when the RCE is filed.

a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 13-1952

i. ☒ RCE fee required under 37 CFR 1.17(e)

ii. ☐ Extension of time fee (37 CFR 1.136 and 1.17)

iii. ☐ Other \_\_\_\_\_

b. ☐ Check in the amount of \$ \_\_\_\_\_ enclosed

c. ☐ Payment by credit card (Form PTO-2038 enclosed)

<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED</b>			
<b>Name (Print/Type)</b>	<u>Jonathan Bockman</u>	<b>Registration No. (Attorney/Agent)</b>	<u>45,640</u>
<b>Signature</b>		<b>Date</b>	<u>November 17, 2003</u>

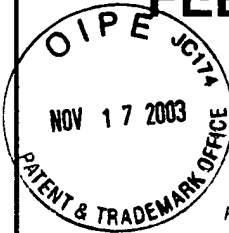
image

1762 Rce


PTO/SB/17 (09-00)

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<div><h1>FEE TRANSMITTAL FOR FY 2002</h1><p>Patent fees are subject to annual revision.</p></div>		<b>Complete if Known</b>	
		Application Number	10/070,292
		Filing Date	March 5, 2002
		First Named Inventor	Tanaka et al.
		Examiner Name	1762
		Group Art Unit	Michael Barr
<b>TOTAL AMOUNT OF PAYMENT</b>		<b>(\$)</b> 770.00	Attorney Docket No. 204552022500

METHOD OF PAYMENT				FEE CALCULATION (continued)			
<b>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</b> Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27				<b>3. ADDITIONAL FEES</b>			
<b>2. <input type="checkbox"/> Payment Enclosed:</b> <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other							
<b>FEE CALCULATION</b>							
<b>1. BASIC FILING FEE</b>							
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid		
101	740	201	370	Utility filing fee			
106	330	206	165	Design filing fee			
107	510	207	255	Plant filing fee			
108	740	208	370	Reissue filing fee			
114	160	214	80	Provisional filing fee			
<b>SUBTOTAL (1)</b>				<b>(\$)</b>			
<b>2. EXTRA CLAIM FEES</b>							
Total Claims	0	- 20 =	x	Fee from below	=		
Independent Claims	0	- 3 =	x		=		
<b>Multiple Dependent</b>					= \$		
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid		
103	18	203	9	Claims in excess of 20			
102	84	202	42	Independent claims in excess of 3			
104	280	204	140	Multiple dependent claims, if not paid			
109	84	209	42	**Reissue independent claims over original patent			
110	18	210	9	**Reissue claims in excess of 20 and over original patent			
<b>SUBTOTAL (2)</b>				<b>(\$)</b>			
<b>** or number previously paid, if greater; For reissues, see above.</b>							
				<b>Other fee (specify)</b>			
				<b>Subtotal (3)</b>			
				<b>(\$)</b> 770			

<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>	
Name (Print/Type)	Jonathan Bockman	Registration No. (Attorney/Agent)	45,640
Signature		Telephone	703-760-7700
		Date	November 17, 2003

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

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